

**For quicker approval complete the  
Notice of Intent to Home School  
on-line form.**

The form and instructions can be found at  
<http://www.arkansased.gov/divisions/learning-services/home-school>

Parents or guardians shall deliver written notice in person to the superintendent of their local school district the **first time** such notice is given.

Notices of Intent can be filed on line after the initial year of home school.

**2016-2017 School Year**

(Do not modify/revise ADE forms)

**District LEA # \_\_\_\_\_ (District use only)**

**Submit/Mail all forms to Superintendent's Office ONLY**

**Check your local phone book or Arkansas Department  
Of Education website for district address**

***Notice of Intent to Home School***

Arkansas Department of Education-Home School Office (501) 683-5780

<http://www.arkansased.gov/divisions/learning-services/home-school>

**FILE FORMS EVERY YEAR:** The NOI form must be returned to the Superintendent's Office EACH YEAR no later than August 15, or by December 15 to begin home schooling the second semester, or during the year with a 14 – calendar day waiting period.

Only the superintendent or local school board has the authority to waive the 14-day waiting period.

**Please retain a copy of the completed form for  
your files.**

**Please print (forms must be legible to be accepted)**

*In accordance with the procedures established for the implementation of Ark. Code Ann. § 6-15-501 et seq., I/we hereby give notice to \_\_\_\_\_, Superintendent of the*

\_\_\_\_\_ School District, \_\_\_\_\_ County, of my/our intent to provide home instruction to my/our own child(ren) located at:

\_\_\_\_\_, \_\_\_\_\_, AR \_\_\_\_\_, beginning date for **2016-2017** \_\_\_\_\_.  
**Print or Type Parent's Street Address** **City** **Zip** **(start date - Month/Day/Year)**

Parent's mailing address if different from above: \_\_\_\_\_

The Arkansas Department of Education recommends that you notify the local school district of any change of address or if you discontinue to home school. In order to maintain legal home school status, current year forms must be filed every year by the established deadlines. During the school year, new forms must be submitted within 30 days of the parent(s) moving to a new school district.

PRINT name of parent/guardian \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Phone Number Today's Date

**Educational Qualifications of Parent/Teacher(s) (Circle the highest level of educational attainment.)  
This information is used for statistical purposes only.**

<b><i>Print or Type Name of Parent/ Guardian</i></b>	<b>Parent/Guardian (Circle one)</b>	<b>School (Circle one)</b>	<b>College (Circle one)</b>	<b>Degree (BA, etc.)</b>	<b>Name &amp; Address of Institution</b>
	Parent Guardian	6 7 8 9 10 11 12 H.S. GED Grad.	1 2 3 4 Col. Grad.		
	Parent Guardian	6 7 8 9 10 11 12 H.S. GED Grad.	1 2 3 4 Col. Grad.		

***No approval letter or curriculum will be sent to parents/guardians.***

**DRIVER'S PERMIT/LICENSE SECTION ONLY – No need to complete below this line if you are not seeking a driver's license.**

**This section below ONLY APPLIES FOR STUDENTS 14 YEARS OF AGE OR OLDER who are obtaining a driver's permit or license during the 2015-2016 year.**

Arkansas Department of Education Rules and Regulations Governing Home Schools 10.00 States: "A student enrolled in a home school shall present proof of home schooling in the form of a notarized copy of the Notice of Intent to Home School. The parent/guardian has the responsibility of providing the notarized copy."

Please call the Home School Office at 501-682-1874 if you have questions. Make a copy of this form and have the COPY notarized and a birth certificate when seeking a driver's permit or licenses.

Notary Seal:

Signature of Notary \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Student Information:**

Name of School Last Attended:

<b>PRINT or TYPE STUDENT'S NAME</b> <i>Please print clearly and legible</i> <u>Give Full Legal Name</u>			Date of Birth Month/Day/Year	Sex (Circle one)	GRADE LEVEL COMPLETED LAST SCHOOL YEAR (Circle one)	GRADE LEVEL STUDENT IS IN THIS YEAR	6-15-507 allows Home School students to participate in Interscholastic Activities. Check box if student will be enrolled in an activity/class.	Plans to obtain a GED	Type of School Last Attended (Circle one)
FIRST	MIDDLE	LAST							
				M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Y N	Public Private Parochial Home
				M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Y N	Public Private Parochial Home
				M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Y N	Public Private Parochial Home
				M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Y N	Public Private Parochial Home

Form Revised March 2016

**Page Must Be Completed - Curriculum (Required information: DISTRICT OFFICE, do not accept this form if this section is blank.)**

<i>Give a list of the subjects to be taught.</i>

**Class Schedule (Required information: DISTRICT OFFICE, do not accept this form if this section is blank.)**

<i>Describe the schedule planned for your home school: (Include the hours per day, days per week, number of weeks)</i>

Arkansas Code Annotated § 6-15-501 through § 6-15-508

Form Revised March 2016

**HOME SCHOOL WAIVER FORM (Do not modify/revise form)**

By my signature below, I hereby certify and agree as follows:

- 1) I am the parent or legal guardian of the child(ren) listed below.
- 2) I have fully read and understand the terms of this waiver.
- 3) As of the date I sign this waiver, I hereby acknowledge that the State of Arkansas is not liable for the education of the child(ren) listed during the time I choose to home school the child(ren).

Signature of Parent/Guardian

Date